



Relative Justice

the experiences and views of family members of people with particular needs in contact with criminal justice and liaison and diversion services

Jenny Talbot with Rebecca Cheung and Sam O'Sullivan

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POPS (Partners of Prisoners and Families Support Group) is a registered charity set up by families who were supporting a loved one in custody, and who formed themselves into a support structure for each other when nothing else was available. Today POPS has grown to be an organisation with over 70 full and part time staff and 35 volunteers, delivering support services to offenders and their families at various stages of the criminal justice process. POPS exist to promote the benefits of supporting offenders and their families. Families themselves are our greatest resource and we involve those with first-hand knowledge and understanding in POPS' project development and delivery, policy, and lobbying activities. Reducing the stigma felt by offenders and their families is a vital aspect of our work:
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¹ 2nd Chance is a POPS’ social enterprise that creates opportunities for vulnerable groups, including offenders and their families, to gain meaningful employment experience within a safe and supportive work environment.

Foreword

Many people who come into contact with criminal justice services have multiple and complex needs, and high numbers have mental health and learning disabilities. In December 2007 I was invited by the government to undertake an independent review of people with mental health problems or learning disabilities in the criminal justice system. What began as a six month review was extended to over a period of 12 months; this extension was to ensure comprehensive consideration of people with support needs at each stage of the criminal justice process. My report contained 82 recommendations (Department of Health, 2009), and most of these are being taken forward – including my recommendation for a nationwide liaison and diversion service, which is currently the subject of an independent evaluation.

At around the same time as my review, the *Care not Custody* campaign called for a more appropriate response to people with mental health problems in contact with criminal justice services. A partnership between the National Federation of Women's Institutes and the Prison Reform Trust, *Care not Custody* was inspired by the tragic experience of a Norfolk Women's Institute member whose son, a young man with mental health problems, killed himself while in prison. *Care not Custody* is supported by a coalition of 31 allied professional groups and charities, representing almost two million people across the health, social care and justice sectors and wider civic society; together, these organisations show the breadth of support that there is for the development of effective liaison and diversion services.

While my review, and subsequent report, did not consider the part that family members frequently play in supporting their relatives, or the negative impact that contact with criminal justice services can have on family relationships, evidence shows the important role they can play in helping their relatives to stop or to reduce reoffending. However, the families of people in contact with criminal justice services also need support; a factor that is often overlooked.

The study, on which this report is based, heard from family members, including parents, grand-parents, siblings and partners of young people and adults with particular needs in contact with criminal justice services. Their personal accounts were at times harrowing: some described the long periods, sometimes years, spent trying to secure effective treatment and support for their loved ones; most highlighted the lack of information as they tried to navigate their way through the justice process, and the confusion and uncertainty they often felt as a result. Many described the negative impact that their relatives contact with criminal justice services had on themselves and their families, and on small children, in particular.

Some family members involved in this study had direct experience of the new trial site liaison and diversion services. Their relief at having, as one mother described it, 'someone on my side' was tangible. Whether it was help to make sense of the situation and to understand what would happen next, the offer of practical support or ensuring referrals

into local services – family members in contact with liaison and diversion services were wholly positive. Those who had no such experience were asked to comment on the model for liaison and diversion and, by reflecting on their own experiences, provided useful feedback.

Families are directly affected when their loved ones come into contact with criminal justice services; we know also that families can play an important role in helping their relatives to stop reoffending and to live safe, healthy and productive lives. This report is a valuable contribution to increasing our understanding of how families can support their relatives, and how their needs might be met through the important work of liaison and diversion services.

A handwritten signature in black ink that reads "Keith Bradley". The signature is written in a cursive style with a long horizontal flourish underneath the name.

The Rt Hon Lord Bradley

1. Introduction

Background, and purpose of this report

The Bradley Report (Department of Health, 2009) recommended the introduction of liaison and diversion services in police custody suites and criminal courts, and this recommendation is being taken forward. An initial investment to support the development of liaison and diversion services was made in 2011, and in January 2014 the government announced that NHS England would begin to roll out services, across England, in police custody suites and criminal courts. An initial ten trial sites began in April 2014, and these were followed by 16 more sites in April 2015 – providing 53% population coverage across England. A service specification and operating model describe how services should be delivered (NHS England 2014a and 2014b). The expectation is to achieve national coverage by 2017, subject to the submission of the business case to HM Treasury in autumn 2015, and their approval.

Liaison and diversion is a process whereby people of all ages with mental health problems, learning disabilities, substance misuse problems or other vulnerabilities are identified and assessed as early as possible as they pass through the criminal justice system. Following screening and assessment, individuals are given access to appropriate services including, but not limited to, mental health and learning disability services, social care, and substance misuse treatment.

Information from liaison and diversion assessments is shared appropriately with relevant agencies so that informed decisions can be made, for example, about charging, case management, sentencing and diversion. Diversion may occur within the youth and criminal justice system or away from it, for example, into treatment and care (NHS England 2014b).

To help inform the model for liaison and diversion services, NHS England commissioned the Offender Health Collaborative² (OHC) to undertake ‘a national service user consultation on the operating model’, and a report was published early 2015. The OHC, in turn, invited the Prison Reform Trust (PRT) to undertake a consultation involving family members and carers³ of people with particular needs in contact with criminal justice services, and with liaison and diversion services, in particular. POPS (Partners of Prisoners and Families Support Group) worked in partnership with PRT to recruit family members, and to help organise and run the consultation.

It was agreed that four focus groups would be held, involving between 24 and 48 family members, and that two focus groups would be held in the north of England and two in the south.

² The Offender Health Collaborative is a working collaboration between Nacro, Revolving Doors Agency, Centre for Metal Health, University of Nottingham, and Cass Business School. The OHC was commissioned by NHS England to develop the operating model for liaison and diversion services.

³ Hereafter referred to as family members.

The purpose of these focus groups, and of this report, is to inform the development of liaison and diversion services prior to national roll out in 2017.

This report is for those who are concerned with the families of people with particular needs in contact with criminal justice services, and for policy makers and commissioners of liaison and diversion, and wider health and social care services, in particular.

The names of family members' relatives, which appear in quotes throughout this report, have been changed to protect their anonymity.

Service specification and operating model for liaison and diversion, as they relate to family members

Liaison and diversion services are described in two NHS England documents: the standard service specification, and the operating model for liaison and diversion services (NHS England 2014a and 2014b, respectively). Both documents were published in draft in April 2014, and describe how services should be delivered. Both documents will be revised, taking into consideration discussions with people who have used liaison and diversion services and with family members of people with particular needs⁴ in contact with criminal justice services.

Both the draft standard service specification and draft operating model note that referrals to liaison and diversion services may be made by family members, friends and carers, and that 'referrals can be accepted via email, telephone or face to face' (NHS England 2014a). For individuals in contact with liaison and diversion services, 'relevant information' should be gathered from 'parents and care givers, family members, friends and carers', and this will add to information gathered by a 'psycho-social assessment', which should include the individual's 'family and social circumstances' (NHS England 2014b). The operating model goes on to say that the psycho-social assessment 'should be completed with reference to family, friends or carers where appropriate'; and 'liaising with family and carers' is described variously as one of the 'key core team responsibilities' or 'key functions of the core team' (NHS England 2014a and 2014b, respectively).

The national/local context and evidence base, and background to liaison and diversion are described in the service specification and operating model, and include a description of early liaison and diversion work involving under 18 year olds:

In 2008... six pilot youth justice liaison and diversion schemes for young people with mental health, learning or communication difficulties or other vulnerabilities affecting their physical and emotional well-being [were run], ... which were designed to

⁴ The term 'particular needs' is used to describe the target group for liaison and diversion services, and includes people with one or a combination of the following: mental health problems, learning disabilities, autism, communication difficulties, substance misuse, personality disorder, acquired brain injury. For children (14 – 17 years of age), the following are also relevant: learning difficulties, ADHD and safeguarding/child protection concerns.

identify and systematically support vulnerable under 18 year olds (and their families) into services early on in their contact with the youth justice system.

In the context of this study, it is noteworthy that similar support for families does not feature in the draft operating model or service specification.

Why families matter

Families have an important role to play in helping their relatives to live safe, healthy and productive lives. For people caught up in the criminal justice system, evidence shows that desisting from crime can be a long, difficult and complex process, and that strong family relationships can help to reduce the likelihood of reoffending (see, for example, Jardine, 2014; McNeill and Weaver, 2010). Positive family relationships and friendships are also important for individuals with particular needs such as mental health problems, learning disabilities or autism. A recent report on the importance of relationships for health and wellbeing said that:

Good quality relationships with partners, families, friends and wider social networks bring health benefits as well as happiness, and provide meaning to our lives. They can help prevent illness, help us recover more quickly and prevent deterioration, and minimise the impact of ill health (Relate, 2015).

The term 'social capital' is sometimes used to describe the network and quality of relationships that provide the emotional and practical support that individuals – and communities – need in order to function effectively; and families are important in this regard:

Good familial relationships provide a further resource: advice on problems faced; loans of money or expensive items; contacts with parental friends; somewhere to live when other accommodation proves unsatisfactory; and so on. Social relationships forged at work and at home create a sense of obligation, reciprocal trust and provide individuals with information channels and knowledge. In short, they provide people with social capital (Farrall 2004).

Contact with criminal justice services, ill health and disability can place considerable strain on even the most loving and supportive relationships; and, for different reasons, can result in stigma, discrimination and disadvantage – not only for the individual concerned, but also for their families. While most families will support their loved one as best they can, they should not be viewed by criminal justice or health and social care services solely as a 'resource', as many have their own needs that should be both recognised and met (Jardine, 2014).

A family's pre-existing needs might be further compounded by the impact of their relative's contact with criminal justice services. Providing timely and meaningful support is therefore important in helping to address any needs they may have in their own right, as well as mitigating the effect of the criminal justice process on their lives, and that of their relative. Families may be the only stable and consistent influence in their relative's life, and this might be especially so when their relative has particular needs, such as those associated with mental ill health, disability or substance misuse.

A recent evaluation of a service that provided community support for offenders' families, jointly funded by Barnados and the National Offender Management, found that:

Family support... filled an important gap in service provision, and there was evidence of a number of benefits for families who engaged with the service, who were often struggling with multiple and complex issues at the point of referral... Families spoke of their relief at being able to talk freely to the Project Workers without being judged. [Family support] was able to assist families in addressing practical or financial concerns, provide advice and strategies to help build parenting capacity, and facilitate contact and/or address concerns regarding contact with the offending family member. The service also had an important role to play in building the self-esteem and confidence of the children and young people who had been negatively affected by their parent's offending, and in tackling the isolation and stigma experienced by families of offenders (Barnados, 2015).

Timely support through family services can help prevent difficulties from becoming entrenched and, consequently, more costly both to the families concerned and the wider community (Cabinet Office Social Exclusion Task Force June 2007).

Where relatives of families have particular needs, such as mental health problems, learning disability or autism, family members can provide useful information about their condition, medication and general wellbeing – with the appropriate consent of the person concerned – and can draw attention to any changes in their relative's condition and behaviour. The website Mental Healthcare⁵ notes that:

Family members and carers should be involved and consulted by mental health professionals, unless their relative says he or she does not want that to happen.

The National Institute for Health and Care Excellence clinical guideline on psychosis and schizophrenia in adults (NICE 2014), recommends that health and social care professionals discuss how family members can help promote their relative's recovery, and should offer family members and other carers 'education and support' to help them in a caring role.

5 http://www.mentalhealthcare.org.uk/treatment_and_care__not_including_medication_#Family_involvement

The impact on children of parental, or other close family member, involvement in the criminal justice system can be especially traumatic. The report, *Children of Prisoners: interventions and mitigations to strengthen mental health* (University of Huddersfield, 2013) found that children with a parent in prison are frequently exposed to

...triple jeopardy through break-up of the family, financial hardship, and extremes of stigma and secrecy, which can lead to adverse social and educational repercussions.

While not all children with family members in contact with criminal justice services will experience a parent in prison, many of the concerns raised by the report, and recommendations made, are instructive in how children and families should be supported. Recommendations of particular relevance to this study include: promoting the role of non-governmental organisations in supporting children and families of prisoners; recognising and supporting care givers in building children's resilience, and the need for greater awareness amongst frontline professionals of the needs of families of offenders to reduce stigma and improve outcomes.

As well as identifying and meeting any needs that families may have, it is important also to recognise and build upon their strengths. Family relationships can provide motivation for change and help to maintain that change. As one family member in this study said:

We don't have to be victims; we have other lives, professional lives. Use our strengths and help us to build on them. We are always going to be there, and we can help.

Families and individual family members have a great deal to offer when their relative comes into contact with criminal justice services, and especially when he or she has particular needs. The importance of families when their loved one is in prison was again brought to the fore in the recent Harris Review into self-inflicted deaths in custody of 18-24 year olds (Ministry of Justice, 2015). The Review demonstrates, as being crucial to saving the lives of young people in prison, the need for much closer involvement of families:

Once in custody, more needs to be done to support young adults... Families can and should play an important role in this. At present, interaction between the prison and families is inconsistent, often inadequate and sometimes inconsiderate.

...the separation of young people from their families and support networks is likely to lead to loneliness and exacerbate vulnerabilities.

Recruitment of family members for this study

The recruitment of family members, especially those with experience of liaison and diversion services, proved challenging – and there were a number of reasons for this. The timescale for the study was short, with only ten weeks to identify and invite family members to participate in, and to run, the focus groups, and to write this report; and there were few pre-existing links with family members of individuals who were, or who had been, in contact with liaison and diversion services.

POPS and Pact⁶ provide services and support for families of offenders and were able to invite family members whose relative had particular needs to join one of the focus groups. However, there was no guarantee they would have experience of liaison and diversion services. Pre-existing contact between PRT and two trial site liaison and diversion services (Sunderland and Bournemouth) helped to ensure the engagement of family members with direct experience of liaison and diversion services.

It is, perhaps, important to reflect further on recruitment and what might help similar consultations with family members in the future – and engagement with family members more generally. As one liaison and diversion service manager explained:

Many parents of young people who offend feel very guilty, responsible for their child's behaviour; the media make it clear that parents are at fault, so to expose themselves to people who may judge and condemn them as poor parents is hard.

The service manager went on to say that her staff are:

... aware of how parents feel and will try at all times to be non-judgmental in their practice. They aim to support parents in dealing with their child's behaviour, acknowledging that teenage behaviour can be very challenging.

This should help to make parents feel comfortable in engaging with the service, and willing to reflect on their experiences.

However, such engagement with family members takes time and is not factored into current commissioning of liaison and diversion services.

POPS and Pact provided further insight:

- Relationships: established relationships are important; family members need to be able to trust whoever is requesting their involvement and may be suspicious of the intentions of a statutory service⁷. It may be the first time a family member has taken part in such a discussion and they may lack confidence and require support both to attend and to participate.

⁶ See inside cover for information about POPS and Pact.

⁷ While the Prison Reform Trust is an independent charity, information was being gathered to inform the development of services by NHS England.

- Stigma: having a family member in contact with the criminal justice system brings with it significant actual and perceived stigma, which can result in families becoming isolated and reluctant to engage, especially with statutory services.
- Distress: group discussions can raise issues that may be difficult or distressing for family members, which may deter them from engaging; and this has implications for follow up support.
- Stage of the 'journey': the early stages of involvement in the criminal justice system can be all-consuming; families can be extremely stressed, and emotionally and financially drained, with little time or 'head space' for anything else.
- Timing: some family members are in full-time employment, while some are unemployed. This has implications for when a discussion is run. Daytime excludes those who work; evenings often pose difficulties with childcare. Childcare is generally an important consideration.
- Travel expenses: it is important that travel expenses are reimbursed, but even that can be difficult for families who can't afford the initial outlay.

Notwithstanding these difficulties, 30 family members participated in focus group discussions or interviews.

Methods used

The research was undertaken during May and June 2015. In total, 30 family members were involved: 25 participated in four focus groups, two of which were held in Manchester and one each in Sunderland and Nottingham. Two family members from Cambridgeshire and one from Bournemouth were interviewed 'face to face'; and, to accommodate work and childcare commitments, one family member from Bournemouth was interviewed by telephone and one from Sunderland was interviewed in her own home. Of the family members involved in the research, six had direct experience of two liaison and diversion trial sites, one of which was a youth liaison and diversion service⁸.

Family members comprised:

- 18 parents: 16 mothers and two fathers
- One grandfather
- One great uncle
- One aunt
- Four partners, all women
- Three siblings, all sisters, two of whom were under 18 years of age and who attended with their mothers
- Two family members didn't describe their relationship.

⁸ The service specification and operating model for liaison and diversion is for an 'all-age service' (see NHS England 2014a and 2014b). However, the Sunderland Youth Offending Service Liaison and Diversion Team work only with children under 18 years of age and, where relevant, will be referred to in this report as 'youth liaison and diversion'. A liaison and diversion service for adults in Sunderland also exists, and both services work collaboratively to ensure an all-age response.

Each focus group comprised two one hour discussions, with a 30 minute 'meet and greet' time, with tea and coffee, and a lunch break in-between the two discussions. The original intention had been to run two focus groups in one day, but this was revised to one focus group per day to accommodate family commitments, such as school runs and other caring responsibilities.

Travel expenses were reimbursed in cash on the day of the focus group, and some family members were collected by car by staff members to encourage and support their participation. Childcare arrangements were made available.

A semi-structured interview schedule was used and there were opportunities for family members to raise points not covered by the schedule. Two interview schedules were used according to whether focus group members and interviewees had direct experience of trial site liaison and diversion services, or not. The two interview schedules were similar and varied only in questions relating to direct experience of liaison and diversion services. Each focus group and interview began with the same scripted explanation of liaison and diversion services, based on NHS England's model and service specification.

The focus group discussions were recorded and handwritten notes were also taken. Handwritten notes were taken during interviews. The same person conducted each focus group discussion and interview; there were three note-takers and each focus group had one or two note-takers. Three of the four focus groups had one or two support workers present during the discussion who were known to the family members present, and one focus group had a support worker, known to family members, in the same building. At the end of each discussion or interview, family members were told who they should contact if they wanted any follow up support, or had concerns about how the focus group or interview had been conducted.

Consent forms were completed by family members, and these explained the purpose of the research and how data gathered would be used, and help was provided to complete these forms where needed; a small amount of information was gathered about the relatives of family members, see Box 1.

Box 1: In total, the family members who participated in this study had 24 relatives in contact with criminal justice services. Of this group:

Age of relative:	
Under 18 years of age	5
18-24	7
25-34	6
35 +	5
Not specified	1
Contact with criminal justice services:	
Liaison and diversion services	6
Police	20
Courts	16
Probation services	10
Youth justice services	9
Prison	16
Support needs:	
Mental health condition	10
Learning disability	1
Autism	1
ADHD	2
Communication difficulties	5
Learning difficulties, such as dyslexia	3
Alcohol problems	7
Drug problems	8
Not specified	4
Number of support needs each relative had:	
One support need	8
Two different support needs	6
Three different support needs	2
Four different support needs	1
Five different support needs	3
Not specified	4

2. The views of family members

Should families be supported?

Each focus group and interview began with the same question, 'should families be supported when they have a relative in contact with criminal justice services?', and everyone said that they should; and there were a number of reasons for this.

For most family members, their contact with criminal justice services was a new and unwelcome experience. They didn't know what to expect and were anxious about their loved one and what would happen next; the situation they found themselves in was overwhelming:

It's one of the most isolating experiences.

It felt like bereavement.

You don't know where to get support; you don't know where to turn.

You're made to feel guilty... and people make snidey comments.

In particular, family members wanted information – both about the particular circumstances of their relative's arrest and, more generally, about the criminal justice process:

Because you are lost! You have to find everything out for yourself and if people haven't got families to help, I don't know what would happen.

Because in families where it's never happened before you are scared about the possible outcome. And for someone like [my son], he needs help as well as punishment.

For some family members, their initial contact with criminal justice services was traumatic, which called for more immediate support:

[When] my house got raided... they wouldn't even let me go and wake my children; how did they feel when a [police woman] dragged them out of bed? They wouldn't even let me go with her [to wake my children].

I was in this room [in hospital] and all I had was this nurse who came and said, 'your son has tried to commit suicide.' I kept on saying, 'I want to see my son', and the police officer came and said 'he doesn't want to see you', and walked out. I had to go home, I was devastated. I had a break down two years later; I never got over it... I was just on auto-pilot.

The sense of shame at having a relative in contact with criminal justice services came to the fore for a number of family members, which often affected their ability or preparedness to seek help:

...we can become quite unwell, traumatised; then it can be quite difficult, because of the stigma, to get the help we need.

Others noted that families were also a 'resource', able to help their relative to change their behaviour and to support their recovery and/or daily living. Two family members said:

There is a natural disposition in the family to support, to cooperate... to help with transitions and to overcome any innate hostility in the person who is in custody. It's foolish to discard that.

By using people around them [their relative] you're saving services. You're enabling people who love and support them to help.

While willing to be a 'resource', upon which their relative and relevant services can draw, family members also highlighted their own need for support:

We need more support ourselves, and then we'll be more able to support them [their relative]. We need to be asked about our strengths, what resilience we have, what strengths we have. We focus an awful lot on them [their relative], but maybe we need a focus as well – what can you build on that's positive?

If I feel supported and my other children are, it makes family life easier. It [youth liaison and diversion] made a difference to how my son was and that made a difference to us all.

I want to support him, and my family; I want to be empowered.

What kind of support is needed?

When asked about the kinds of support that might help, a range of different needs were raised by family members. The main themes that emerged were:

- General information about the criminal justice process

Most family members said they would have liked more information about the process to which their relative was subject: not knowing what was going on or what would happen next, who to talk to or how to access information was frustrating and debilitating. From the point of initial contact with the police, through to court appearance and, where relevant, sentencing, family members who were not in contact with liaison and diversion services said they were given insufficient information and found it hard to get information:

I've got a good job and usually know how to get information and get things done. After my brother got in trouble I couldn't find anything out or get any help.

It's sad there wasn't anyone to talk to, who could tell me things that I could do to get information or support; nobody has helped. If I hadn't had the intelligence – and we are ordinary people – and a big family, and close knit, I don't know what we would have done.

Another family member said that even with the help of a solicitor, understanding the criminal justice process can still be hard:

Fortunately our solicitor told us what would happen, just all the procedures, otherwise how would you know? My dad [the grandparent of the accused] went to see the solicitor and because we were paying we got information, and even then it was hard to get and to understand.

Family members generally knew little about the criminal justice system until they were faced with the arrest of their relative. As one mother put it:

I wanted to educate myself so that I knew what to do for the best.

- Specific information about their relative

Family members were especially concerned about their relative's initial arrest – they wanted to be told, in a timely way, when their relative was arrested and whether they were safe and well. Some described their worry at not knowing where they were and wondering if they had come to harm:

In my case I was waiting for him to come home. He didn't come home. At midnight I thought something's wrong. By 2am I phoned the police station, I didn't know what to do. I got a phone call at about six in the morning saying he'd been arrested. I was beside myself; I do think you should be told straight away.

While a mother of a young adult (aged 19 years of age) said:

He may be an adult but it was the first time he had left home, and you have to look out for them, what their needs are. He had moved from a little village to a big city.

Other family members described being worried that, while in police custody, the police wouldn't 'look after' their relative or understand their particular needs. One mother told how, when she phoned the police station to enquire about her (adult) son, she was told, 'we can't give out information, he's old enough'; while another said:

You ask, 'why have they been arrested?' and they can't tell you. And you think, hang on a minute, this is my child that you're arresting, I've got a right to know why you're taking them to the police station.

In contrast, two mothers of adult sons (not in contact with liaison and diversion services) described their experiences thus:

I rung up and told them [the police] he's got ADHD [attention deficit hyperactive disorder] and that he had been threatening suicide. I asked, 'can you check him, but can you do it while I'm on the phone... because it's playing on my mind' and he [the police officer] said 'yes'; and he [her son] was hanging from the ceiling. I'm glad that I rung up because they wouldn't have checked otherwise.

The sergeant was ringing me, kept me informed about his health, his progress and what was going to happen to him, and when he was going to be released. It made me feel better, so I wasn't worried about him.

Following initial arrest, family members wanted, but often found it hard to get, information about their relative; such as how long they might be in custody for, whether they needed anything – such as food or clothing, and why they had been arrested. They wanted to know whether they could speak to their relative on the phone and whether they could visit. Not knowing the answers to these, and other questions, added to the stress and anxiety of an already traumatic situation.

Following arrest, family members said it would be helpful to be kept informed, on an ongoing basis, about what was happening to their relative and what was expected of them, for example bail requirements and other appointments.

One family member compared her experience of being given information when she had been a victim of crime to that of being a family member of an alleged offender:

I got all sorts of information then [when she was a victim of crime], stuff I didn't even need to ask for. Why can't they do the same for us?

For family members in contact with liaison and diversion services, access to information, both general and specific, was more readily available:

She [the liaison and diversion worker] said I could call her and in the early days I did phone a lot.

They [the liaison and diversion worker] sat down and talked to you and let you know what would happen and what they could do.

- Support for family members

Other than the six family members' who had benefitted from their contact with liaison and diversion services, family members received little in the way of support when their relative was first arrested.

In addition to general information about the criminal justice process and specific information about their relative, the types of support most frequently highlighted by family members as being potentially helpful were:

- someone to ask for help; somewhere to go for help:

Wouldn't it be nice to have a support worker, someone on your side right from the start? You haven't got a voice otherwise, and you're swallowed up by the system.

More POPS:⁹ my confidence is up; it's changed my life around... I was at rock bottom, stuck in my house 24/7.

- someone who will ask the family if they need support:

Wouldn't it be a good idea to have someone to ask if you're ok?

- financial advice, including benefits and debt, especially if it is the main wage earner/recipient of benefits who has been arrested:

When you get bailiffs letters it does scare you.

- housing, especially tenancy advice and mortgage repayments:

They [the landlord] was going to take me to court... I can't take the flat now.

- family support:

I would have liked help to explain to my daughter what was going on. How could I tell her that her daddy had done something really bad? And what should I tell her school; should I tell the school? I didn't know what to do or say.

- personal and emotional support:

Sometimes you don't want to speak to your friends or your family because you feel ashamed.

- peer support:

It's helpful because you know you're not on your own and not being judged by outsiders.

⁹ POPS: Partners of Prisoners and Families Support Group; see page 40.

In each of the focus groups and in two of the four one-to-one interviews, family members, including those in contact with liaison and diversion services, said they found it helpful to talk to others who had been through the same, or a similar, experience; and many spoke positively of having participated in the focus groups for this study. Family members described a number of benefits of such support, including: knowing that 'you're not alone', and that other people have gone through, and survived, similar experiences; knowing that the person you are talking to understands that it can be 'tough', 'scary', 'isolating' and 'overwhelming'; and, perhaps most importantly, knowing that your 'peers' will not think badly of you, or 'judge you' because your relative is in contact with criminal justice services.

Stigma, isolation, and feelings of shame and guilt were raised by family members in each of the focus group discussions. Many family members spoke of being made to feel a 'criminal by association', often facing unpleasantness and sometimes abuse from members of the community and from criminal justice personnel:

Family members are left scarred by the trauma of what they go through and there's no support for the family; but what they're left with... is a lot of insinuations, snide comments from the police, and suggestive remarks, with nobody there to support you.

I don't think people realise the extent of the stigma, and the silence you go through.

Some family members had been present when their home was searched by the police or had been at home when their relative was arrested; and while such experiences are unpleasant and will cause distress, the approach taken by police officers can make a big difference. One family member said:

He [the police officer] talked to me like I was a human being... I was in a right state, and it was a very kind thing to do. The contrast when a different [police] force came – it was horrific.

Family members in contact with liaison and diversion services spoke at length about the support they, and their relative, had received. For themselves, in addition to being kept informed of what was happening, family members spoke highly of the moral support they had received: somebody who listened to them without judging and who took their fears and concerns seriously. As two parents put it:

You feel happy when you see them [the liaison and diversion worker] walking down the path.

She [the liaison and diversion worker] let me speak and she would ask us questions. She showed an interest in us, as a family. She was sad when Robert lost his job, and really pleased when he got another. She came across as really nice and caring. She wasn't in any way judgmental. It was like she understood what we were going through.

For their relative, family members highlighted the support they received from liaison and diversion to access other local services, especially healthcare, which they hadn't been able to access hitherto – despite, in some cases, having spent months or even years trying:

My son is coping with his dad's death and is involved with drugs and legal highs; he's only 15. I had never heard of the Youth Alcohol and Drug project until they [liaison and diversion] helped.

They [liaison and diversion] put everything in place; the ADHD team has pulled their finger out, and I've got the children's team. They've opened the door, things I couldn't get before, I can now. I tried, but it was too hard – you don't know where to go.

We tried our GP who didn't know who to contact or who could help – he tried, but he didn't know. So we went back to [the liaison and diversion worker] and she looked and found something for us; she found out about the service, the name of the person we should talk to and the telephone number. It was so helpful; we just didn't know what to do.

My son is calmer; the house is calmer. We aren't scared. [liaison and diversion]

Family members who had been helped by youth liaison and diversion spoke in glowing terms about the ongoing support both they, but especially their child had received:

My son is now doing an apprenticeship. He was talked to by [the youth liaison and diversion worker] and they are, like, friends. He's doing really well. He hadn't been to school for two years and was back within a month of [youth liaison and diversion] being involved. If it wasn't for this service my son would be in prison.

...and expressed their frustration and anger that it had taken contact with youth justice services before their child had received help:

My son had problems before he got involved with the police and I tried to get help through the school and doctors. You should have somewhere to go before they get in trouble.

If we'd had access to [youth liaison and diversion] before it came to the arrest, it might all have been stopped before it started. But now he's got a record.

There are so many different people and you don't know who to go to, who can help – and they don't help.

Liaison with family members

Most family members felt strongly that they should be involved when their relative first comes into contact with criminal justice services, especially if they are under 18 years of age. This accords with the service specification and operating model for liaison and diversion, which describe gathering information from family members as one of the 'key functions of the core team' (NHS England 2014a and 2014b). However, family members of adults qualified their desire to be involved by noting that any involvement should be predicated on consent being given by their relative; and this is considered in *Questions of confidentiality*, below.

Family members, especially parents (of children and adults), felt their input was invaluable in helping to describe their relative's 'history', current difficulties and support needs, and this was especially so for parents of children under 18 years of age:

Nobody knows the child better than their own parent. They can help to pin point problems; they know what happens in their [child's] daily lives. I'm not saying I know what it [the diagnosis] is, but I know there's something wrong and I can talk about it. A professional maybe has one or two meetings; they won't know what it's like. I know it [getting a diagnosis] takes a long time – what I'm saying is that I can help.

Some family members felt they could offer important insights should their relative be reluctant or unable to engage effectively:

I know my own: my eldest, who is struggling with crack cocaine is a fantastic liar, he needs an Oscar! Because that's what they're like when they're on drugs; and they'll tell the person what they want to hear.

My brother would say, 'I'm fine'; and we'd say, 'you're not!'

The family are a unit and you can remind [your relative] of things and help them.

While others qualified their response, noting that individuals either may not want family members involved, or may only want certain family members to be involved:

It depends; with George... it's hard. Some people might not want their families involved, but families pick things up. Families can't always give the help, because people [their relative] don't want it. But yes, on balance, the conversation should be had about sharing information with family members, a named person.

Some family members were asked to undertake the role of Appropriate Adult while their relative was in police custody; and, while most had a reasonable understanding of what the role involved, many said they felt ill-equipped or too emotionally involved to perform the role effectively¹⁰.

10 For a description of the role of Appropriate Adult, and the challenges of provision for vulnerable adults, see <http://www.appropriateadult.org.uk/>

Other ways in which family members said they could help were by:

- Ensuring, supporting and encouraging attendance at appointments, whether criminal justice, health or social care; and attending with their relative, if they agreed:

My partner gets distracted. I'll take the day off work and make sure he gets to appointments.

- Being invited to comment on proposed 'packages' of care and support, and sentencing requirements:

It's a bugbear with me; they didn't listen to a word I said. They wanted to put him on a curfew and I said, 'it won't work because of his disability' [he doesn't understand the concept of time]; and he broke his tag. The judge said he should never have been put on a curfew.

Family members often saw themselves as the only ones with a long term commitment to supporting their relative – a commitment that health and justice professionals simply did not, and could not, have – and wanted their views to be heard and taken into consideration. However, family members also recognised the value of objective, 'professional' advice, appreciating that they could sometimes be 'too close' or 'too involved' in the immediate situation, and that professionals could offer a new and valuable perspective. This was highlighted by one family member who described how she had been counselled against offering a home to her adult son, which, although painful at the time, she now knew had been the right decision both for her son and for her own wellbeing:

Sometimes it does take a professional to open your eyes. He said, 'you're 60, you can't do this [be a full time carer] anymore.'

What is needed is a shared approach where all concerned – professionals, family members and the individual concerned – can contribute. As one family member said:

Every family is different but most will do everything to help. Anyone who is close [to the person in contact with criminal justice services] has useful and helpful information.

While another said that the care package should 'always include the carer'.

Imposing solutions on families or on particular family members was not the answer; and some family members were wary of, and angry about, 'solutions' being imposed on them. One example, given in two of the four focus groups, involved parenting classes:

Being told I'm a crap mum and having to do parenting courses doesn't help. I've got three others, and they're ok. It's not me that needs help, it's my son. Giving out stars for good behaviour? Well, that didn't last long, did it?

Questions of confidentiality

While most family members said they should be involved in giving information to, and receiving it from, liaison and diversion services when their relative first comes into contact with the criminal justice system, the question of confidentiality was also raised.

For adults (aged 18 years and above) it was acknowledged by family members that the individual in contact with criminal justice services had the right to privacy and, if he or she didn't want a family member involved, their decision should be respected. However, if the family isn't notified, shouldn't somebody be told? One father of an adult said:

Jason was on a list of vulnerable adults – he had been in touch with services; he was known to services. If he didn't want us to know, there should have been somebody; there wasn't even an appropriate adult the first time [he was interviewed by the police].

While another parent of an adult said:

I've got an issue with that [an individual refusing permission to share information with a family member]; should they go on to serve a prison sentence who do they want to visit them? Their mum – so shouldn't we know in the first place? It's about encouraging those who have been taken into [police] custody to nominate a family member. And they should be asked, 'who do you want to nominate?' And somebody saying to them, 'it's not all about you; your family might need support too.'

Discussions centred on the balance between respecting an adult's right to choose not to give permission for family members to be involved in conversations about them, and ensuring that the individual concerned understood why it might be helpful to give that permission. A support worker who attended one of the focus group discussions described it thus:

All the lads I work with who are over 18... part of the work I do is explaining why we need that permission to discuss their case with their parents. We're not going to share information willy nilly; information will only be shared when it's relevant.

One family member said that asking permission to share information should be like asking for an individual's 'next of kin'. He went on to say:

It should be a matter of routine, part of the procedure; and if they say 'no' then it should be explained to them, and they should be told they can change their minds later on, if they want to.

Some family members said that 'confidentiality' can sometimes be used as an excuse by officials not to share information either with them, as family members, or with other relevant officials and services. This was both frustrating and worrying: frustrating because they were asked to repeat information they had already given; and worrying because of an apparent lack of joined up working.

For the family members of children (under 18 years of age) in contact with criminal justice services there was an expectation that they would be kept informed and involved throughout the process; for example, by being invited to appointments and receiving and imparting information, as a matter of routine. However, there was also the acknowledgement that children...

...need respect and privacy. Unless it's about something dangerous, illegal or about safeguarding, they [children] should be able to keep things private.

And family members of children in one focus group agreed with the point made by a mother, who said:

My son might not want me to go to an appointment with him... it depends what it is; he might express himself better if I'm not there.

The detail: what can help to make liaison and diversion work?

Throughout the focus group discussions and interviews, family members were asked about their views on liaison and diversion services, based either on their direct experience or as described during the focus group or interview, and on particular elements of the operating model (NHS England 2014b). A number of themes emerged and these are described below.

- Information about liaison and diversion services

Most family members had not heard of liaison and diversion services either prior to their direct contact with them, or prior to participating in a focus group or interview. All family members agreed that the kind of service and support available through liaison and diversion could have considerable benefits for both the individual in contact with criminal justice services and their families. On hearing a description of liaison and diversion, one family member said:

That could have made all the difference for my son. We carry a guilt that we have been able to do so little; and now he has a criminal record.

There were a number of suggestions about how liaison and diversion services could be 'advertised', and these include:

- Posters in police custody, and leaflets that should be given out as a matter of routine
 - Information via defence lawyers and duty solicitors
 - Posters and leaflets in advice centres, and in women's centres
 - Written information contained in local council tax notices
 - Through organisations that work with families of prisoners, such as POPS and Pact
 - Greater use of technology: a website with local liaison and diversion service contact details, and information about liaison and diversion and the criminal justice process, including 'frequently asked questions'.
- Making contact with liaison and diversion services

Making contact with 'official' services can be hard, both practically and emotionally. Some family members said they found it hard asking for help; for example, because they felt ashamed or because they didn't know what help they could ask for, or how to phrase a request. It was therefore important, they said, that initial contact with liaison and diversion services was quick, easy and 'friendly'. Other family members said that by the time they realised they needed help, they were 'that desperate' they would ask anyone.

Practically and, in part, in response to the difficulties expressed above, family members said it would be helpful to be able to pick up a phone and get straight through to a 'real person', without first having to wait on the phone 'for hours and hours' or be passed through a telephone reception to various departments until they were put through to 'the right person'. Family members' experience of trying to contact services had not always been positive:

It's awful if you're waiting for calls; you're constantly on the phone waiting to get through.

You think they must be too busy, or they don't want to talk to you. So you hang up.

You get the feeling there's a phone ringing and ringing in an empty room.

Only one family member said email contact would be helpful and, while there was a general agreement in that particular focus group discussion, it wasn't raised by family members in other discussions. One family member in contact with liaison and diversion services said that she was in touch with her worker by email, but that was only because her work place had a secure email address.

Family members in contact with liaison and diversion services greatly appreciated being able to contact staff directly, and all six family members had been given the mobile phone number for 'their' worker:

It's easy to get in touch; I have her mobile number and I can text. If I call, she rings back quickly.

I have her mobile number... and I would leave a message if she wasn't there. Never once did she not get back to me.

One family member was given a mobile number when she experienced difficulties contacting 'her' liaison and diversion worker; the family member explained that while she understood she couldn't have constant access to liaison and diversion services, she didn't feel confident that the messages she left with the person who answered the telephone were passed on.

- A 24/7 service¹¹

Most family members, and all who had benefitted from youth liaison and diversion, said that services should be available 24 hours a day, seven days a week:

It would be an improvement if it could be a 24 hour service.

Our kids don't get into trouble [between the hours of 9am and 5pm].

Weekends are terrible; it's not a 24/7 service.

What if it's two o'clock in the morning that you need help? That's when you need it not in eight hours time.

- The staff

During the focus group discussions and interviews with family members in contact with liaison and diversion services and with POPS, the way family members talked about named members of staff, and their relationship with them, was noteworthy; so we asked, what was it that made these members of staff 'special'?

- Staff are non-judgmental

She wasn't in any way judgmental. It was like she understood what we were going through. (Liaison and diversion)

If you're from a council estate and are a single parent, other people judge you, put a label on you. (Liaison and diversion)

¹¹ According to the Operating Model for liaison and diversion services, 'Coverage should be a 24/7 service consisting of a mix of operating times and out-of-hours arrangements, including links to existing services and provision. Exact hours of operation will be based on local need and subject to the views of local commissioners and other stakeholders' (NHS England 2014b).

- Staff are ‘normal’

You need somebody to be down to earth, and they are. (POPS)

They are at the same level; they understand. (Liaison and diversion)

The people here are normal people; they put you at your ease and don't look down on you. (Liaison and diversion)

- Staff are ‘firm but fair’

He shouted at me, but in a good way. (POPS)

There are boundaries when they talk to the kids. (Liaison and diversion)

- Staff have good people skills

They speak with you, not at you. (POPS)

They are very direct and honest; sometimes you don't want to hear what they have to say. (Liaison and diversion)

They don't talk in big talk, in words you don't understand. They explain things. (POPS)

- Staff are there for you

She made us feel that somebody understood and cared about what was happening, and was trying to help. (Liaison and diversion)

They ask about you first. (POPS)

- Staff are reliable and will do what they say they will

If she says she's going to call back, I know that she will. (Liaison and diversion)

They try and get you to do things, but they will also do things for you. And if they says they will, then they do. (POPS)

Where positive and trusting relationships were built between family members and staff, it seemed that some important benefits accrued: family members were more confident in talking about their experiences and concerns, without fear of judgment or misunderstanding, and were more prepared to be challenged constructively by professionals and practitioners.

- Ongoing support

Family members in contact with liaison and diversion services spoke positively about receiving 'ongoing' support – staff being there for them, and their relative, over a period of time. In one focus group, family members in contact with youth liaison and diversion services described themselves as being 'lucky' to have such support, and one said they would like it to continue beyond their child's contact with youth justice services:

They don't just come to one meeting, and then you're on your own; she keeps helping. It does build your confidence but I'm dreading when it stops.

Family members in contact with POPS spoke about the benefit on ongoing support, and of being able to move in and out of services according to personal circumstances and need:

It's so important, spending time with families... they listen to families, take on board what they are saying. If people were listened to, they would have the services that they need. It makes a huge difference – not just now, but I know they will help in the future too, if I need them.

While family members said that support should be available to their relative and to families for as long as was necessary, there was also the recognition that ongoing support wasn't a role that liaison and diversion services were either best placed, or able, to undertake.

3. Concluding discussion

This concluding discussion draws together the main themes that arose during discussions and conversations with family members, as described in the preceding pages of this report, and as they relate to liaison and diversion services.

There are five main themes, which are discussed in turn:

- Support for families
- Meeting families' needs
- Awareness of, and contact with, liaison and diversion services
- Confidentiality
- Awareness training

Support for families

Contact with criminal justice services is frequently shocking and overwhelming, and the family members who took part in this study were clear that families should be supported. Evidence clearly demonstrates the importance of families, and the benefits that can flow from supporting the families of offenders (see *Why families matter*, page three). The extent and kinds of support identified by family members as being necessary ranged from immediate short-term support, most often information about the criminal justice process and about their relative, through to long term support to meet wider family needs. Long term support is especially important when a family's relative is sentenced to prison, and when children are involved. While families have much to offer, and will frequently provide life- long support for their relative, they also need support to do so effectively.

The kinds of support identified by family members can be clustered under the following headings:

- practical support, such as information about and help to access local services
- moral support, such as having a 'trusted' person to turn to who is non-judgmental and can help answer questions
- peer support: this was described as being especially valuable – knowing you are not alone and that others have had, and survived, similar experiences
- information about the criminal justice process and about their relative
- information, advice and guidance to enable family members to better support their relative.

However, support for families wasn't just about overcoming 'deficits'; it was also about building on their strengths and resilience. One family member said she wanted to be 'empowered' to support both her relative in contact with criminal justice services, and her family.

Family members strongly expressed their desire for information and support at the earliest possible juncture of their relative's contact with criminal justice services, which should be continued throughout the justice process to which their relative is subject. Each stage of the process – police, court, sentencing, probation and prison – is different and has its own challenges for family members. By supporting families and providing information and access to services early, the negative impact on families can be reduced, so helping to prevent the escalation of situations which may require more intensive and potentially more costly interventions, at a later date.

Family members in this study who were in contact with liaison and diversion services spoke highly of the ongoing support both they and their families received.

Support for families is, to an extent, predicated on effective initial engagement with one or more family members, and this is especially important for families who, hitherto, have had a less than satisfactory contact with statutory services. The difficulties experienced in recruiting family members for this study perhaps reflects an underdeveloped framework for such engagement within the current NHS England operating model for liaison and diversion.

Whether through direct experience, or having heard about liaison and diversion by participating in this study, all family members welcomed the idea that such services could help to facilitate access to information and support; one family member said:

As a mandatory service, that would be brilliant!

Meeting families' needs

Family members in this study described a range of different needs for which they and their families might need support, both in the short and the long term. While liaison and diversion services are best placed to meet certain needs, such as providing information from the initial point of contact with criminal justice services and engaging with family members, it is perhaps unreasonable to suggest that they can, or should, meet family support needs over an extended period.

Organisations exist across England that offer support to families with a relative in contact with criminal justice services; see Appendix 2. Often from the voluntary sector, these organisations are skilled at working with families; for example, building confidence and self-esteem, helping family members to engage with mainstream services, and delivering a variety of targeted family support services – each of which can have a positive impact on the health and wellbeing of families.

It is also important to consider the particular needs that family members with learning disabilities, mental health problems or autism, might have; and a number of organisations can help in this regard, including, for example, the *Working Together with Parents Network*, which supports professionals working with parents with learning difficulties and learning disabilities, and their children: <http://www.bristol.ac.uk/sps/wtpn/>

The model for liaison and diversion would be significantly enhanced if services were able to make routine referrals into local family support services; and this is especially important for families with children, and when family members have particular needs. However, such services are not always available or immediately accessible.

Awareness of, and contact with, liaison and diversion services

Family members described being overwhelmed by their contact with criminal justice services; and were often unaware of, and sometimes ill-equipped to seek out, services and support available to them. No family member was aware of liaison and diversion prior to either their direct contact with services, or their participation in this study; and most family members said it was hard to find out information about their relative, and about the criminal justice process, more generally.

For family members to make referrals to liaison and diversion services, they need to know they exist. Family members in this study said that referral routes should be straight forward, for example a telephone number to call that is answered by a ‘real person’ rather than a machine or an anonymous switch board, and timely – having to wait long periods for a call to be returned adds to feelings of anxiety. Family members made a number of suggestions for how local liaison and diversion services can be ‘marketed’ and some of the pitfalls to avoid; see *The detail: what can help to make liaison and diversion work?*, above.

Confidentiality

While family members expressed a strong desire to be involved in the giving and receiving of information about their relative, most acknowledged that, when dealing with adults, this could only happen with consent. For family members to effectively contribute to assessments undertaken by liaison and diversion services, as described in the operating model (NHS England 2014b), early consent is necessary.

Conversely, it can be extremely difficult for family members to support their relative when important information is withheld from them by support services on the basis of confidentiality.

When first detained by criminal justice services, individuals may be reluctant to tell the police that they want a family member to be informed where they are¹², and this might be due to feelings of embarrassment or shame; they may also be reluctant to give permission either to the police or to liaison and diversion services to share information with a family member, for similar reasons.

A clear, standard explanation as to why consent to share information is helpful, and when sharing information with a named person might be necessary, should be developed. This would be used routinely by frontline liaison and diversion staff and be written in an accessible format such as ‘easy read’.

¹² The notice of rights and entitlements sets out a person’s rights while in police detention and is issued in accordance with the Police and Criminal Evidence Act Code of Practice C, paragraph 3.2; individuals have the right to have someone told that they are in police custody.

A 'fluid' consent process, activated at an individual's first point of contact with criminal justice services, in which consent is obtained for certain information to be shared with one (or more) named family members, would enable families to contribute in a meaningful way. Consent would be 'fluid' in the sense that it would be reviewed at regular intervals and be open to amends, as needed; for example, in the event of the individual changing their mind about consent to share information or a relationship break-down.

Ideally, the same consent process would be supported and implemented by agencies throughout the criminal justice process; and particular consideration would need to be given as to how this would be administered in custodial settings where security considerations can override effective communication with families.

Amongst the family members of children (under 18 years of age) in this study there was an expectation that the parents, or one or two named family members would be invited to participate fully in the giving and receiving of information about their child, and be kept informed throughout the process. However, family members also expressed the view that children should be accorded respect and privacy, where appropriate.

Awareness training

Contact with criminal justice services can have a devastating impact on families, and especially children (see *Why families matter*, page three).

In 2013, recognising the frequency with which education staff were coming into contact with children affected by parental offending, the Department for Education commissioned the i-HOP service: the *Information Hub on Offenders' Families with Children, for Professionals*¹³. The launch of the service coincided with the report, *Children of Prisoners: interventions and mitigations to strengthen mental health* (Huddersfield University, 2013), cited earlier in this report.

The i-HOP service supports professionals to work with children of offenders and their families through a national programme of workshops and an online information hub. The online information hub collates and promotes examples of support services, resources, policy and research. A 'tool kit' is being developed to assist organisations working with children and families affected by imprisonment to evaluate and further develop their services.

Awareness training for liaison and diversion staff, or for particular members of the core team, would help to ensure greater recognition and understanding of the impact that contact with criminal justice services can have on families, especially children, and help ensure appropriate referrals to family support and children's services.

¹³ <https://www.i-hop.org.uk/>

4. Recommendations

These recommendations have been made on the basis that, having asked the Prison Reform Trust to consult family members about their needs, the Offender Health Collaborative and NHS England are committed to enhancing the engagement between liaison and diversion services and family members, and subsequent support for the families of individuals with particular needs in contact with criminal justice services.

Support for families

Families of people with particular needs in contact with criminal justice services should receive timely and appropriate support, and this is especially important when family members include children whose parent or carer is in contact with criminal justice services. The current operating model for liaison and diversion enables certain support to family members of people in contact with their services, including:

- Providing information about their relative (with his or her consent), and about the criminal justice process generally
 - Moral support, as it relates to providing relevant information in a way that is accessible, timely and helpful
 - Referrals into local services, including family support services, where they exist.
1. To enable effective family engagement, leading to meaningful support for families, especially when family members include children, outcomes should be included in the NHS England service specification and operating model for liaison and diversion, and in the subsequent commissioning of services; and resources should be made available for this.
 2. A family engagement role should be part of the core or extended team (see NHS England 2014b), or commissioned separately, for example, from pre-existing family support services (see, for example Appendix 2); an integral part of the role would be to help families to engage with relevant mainstream services and to make referrals into family support services, as necessary.
 3. Family support services that can respond to families' immediate and ongoing needs should be co-commissioned locally; existing budgets could be aligned or pooled from different streams of funding to achieve better outcomes and value for money. For example, the requirements for family support within existing local programmes for Troubled Families; Supporting People legacy programmes; local authority strengthening communities programmes; Community Rehabilitation Company plans; and Police and Crime Commissioning plans. Local family support services could be commissioned from pre-existing women's centres and providers of support for offenders families.

Awareness of, and contact with, liaison and diversion services

4. Liaison and diversion services should be proactive in promoting their services to families. This should include information in both paper and electronic form, for example, local websites, leaflets and posters in police custody suites and in youth and criminal courts; and through routine contact with local services such as Citizens' Advice and women's centres; and community learning disability and mental health services.
5. With the consent of their relative, family members should be contacted routinely and in a timely way, and informed orally and in writing what they can expect from liaison and diversion services, and what information liaison and diversion services would like from them. Written information describing local liaison and diversion services and the kinds of input services might ask for from family members should be written in an accessible format, such as easy read¹⁴.
6. Contact with liaison and diversion services, especially referrals from family members, should be straight forward – meaning a telephone number that is answered by a person rather than a machine or an anonymous switchboard, and an email address; telephone calls or emails should be responded to by an appropriate person in a timely manner and within a stated timeframe.
7. Family members in contact with liaison and diversion services should be allocated a named contact person and have easy access to them, for example, via a mobile phone.

Confidentiality

8. While recognising an adult's right not to give permission for information to be shared about them, or for information to be sought from family members, individuals in contact with criminal justice services should be made aware of the benefits of proportionate information sharing with named family members during their initial contact with liaison and diversion services.
9. Consent to share information should be 'fluid' – meaning that it should be reviewed at regular intervals and be open to amends, as needed.
10. A clear standard explanation should be developed describing why consent to share information is helpful, and when sharing information with family members or asking for information might be necessary; and this should be written in an accessible format such as easy read.

¹⁴ Easy read documents present information using simple words and pictures making it easier to read and to understand; see, for example, <http://www.keyring.org/cjs-easyread>

Awareness training

11. The impact on families when a relative comes into contact with criminal justice services can be devastating, especially for children. Following the lead set by the Department for Education¹⁵, frontline liaison and diversion staff should be given the opportunity to participate in family support awareness training to enable greater recognition of need, and appropriate referrals into family support and children's services.

The role of families in service development

12. Families have much to offer when their relative comes into contact with criminal justice services, and effective engagement with family members has the potential to realise a number of benefits. NHS England should consider establishing a national forum of family members, which would help to monitor and inform the development of liaison and diversion services through to national roll out in 2017/18 (subject to the submission of the business case to, and approval by, HM Treasury).

¹⁵ See page 30 of this report

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Appendix 1

Views of family members in contact with liaison and diversion services:

- *I feel I'm being listened to. Before, it was just another young mum wanting more benefits. I encourage my kids to be good; I let them know when they are doing wrong. He's not just a naughty boy. You don't want to admit when your child can't do things; I could see that his younger sister could do things that he couldn't. It's harder when you've got no family to turn to. I knew something wasn't right, and now I have some help.*
- *She [the liaison and diversion worker] organised someone to show Alex round the court so he could see it before he went, and he found that very helpful. And the same person who showed him round came when he went to court, so he knew someone; I think [the liaison and diversion worker] arranged that too.*
- *You feel you have nobody. Children with problems need help – he could have a bright future, I want him to and I couldn't see the way. But now he can have a bright future.*
- *When Peter was arrested she [liaison and diversion worker] was very supportive, she made me feel a bit better; and she's kept in touch to see how everything's going. We all got on very well. She would talk to both Peter and myself. She would call in the evening, because I'm at work during the day. She was especially interested in how Peter got on when he was seeing the Asperger Service. She's like a friend really, when she calls. She's been so helpful.*
- *I didn't have anyone else, and I've got four kids. It stopped me feeling so isolated; I have somebody to talk to. I could talk to [the liaison and diversion worker] and he could support the whole family. It helps us to cope better.*
- *My son had problems before he got arrested. I asked the school, our doctor, and social workers, and got nothing. It took him getting arrested to get help.*
- *No, I can't think of anything else she could have done better. She [liaison and diversion worker] has been great, a real life saver.*

Appendix 2

The following organisations provide information and support for family members of individuals in contact with criminal justice services; it is not meant to be comprehensive. Details have been drawn from the iHOP website, the *Information Hub on Offenders' Families with Children for Professionals*, which is a partnership between POPS and Barnardo's: www.i-hop.org.uk

Action for Prisoners' Families (APOF)

Action for Prisoners' Families (APOF) is the national membership organisation for prisoners' and offenders' families and those who work with them. Their 1800 corporate and individual members are drawn from a range of disciplines in the voluntary, public and private sectors. They include social workers, staff from public and private prisons, teachers, health visitors, children's centres, probation officers, youth workers, parenting practitioners and mental health teams. <http://www.prisonersfamilies.org.uk/>

AFFECT

AFFECT is an organisation which supports families and friends of offenders who are potentially facing a long or life sentence of imprisonment. A great deal of those at AFFECT have experienced the imprisonment of a close relative or friend. AFFECT provide face to face or telephone counselling, telephone support, group meetings, befriending, court support, training and presentations. <http://affect.org.uk/>

Barnado's

Barnardo's works with more than 200,000 children, young people and their families each year and runs more than 800 services across the UK.

Barnardo's believes in the potential of every child and young person, no matter who they are, what they have done or what they have been through. They will support them, stand up for them and bring out the best in each and every child.

Barnardo's supports children affected by parental imprisonment (CAPI) and their families by providing a range of services across the UK. They run dedicated services in the community and in prisons, and universal services in early years centres.

<http://www.barnardos.org.uk/>

Childline

Childline have a dedicated page of their website for children and young people affected by imprisonment. Here children and young people can access answers to common questions surrounding the criminal justice system and the impact this has on them. Advice includes what to tell school, how to cope emotionally, who to talk to and what to do upon the return of a parent into the family home.

Childline have focused on the emotional impact a parent going to prison can have on children, and have included links to how to cope with stress, anger, depression and loneliness. There is also a message board for young people with a parent in prison to discuss their experiences and find other young people in a similar situation.

<http://www.childline.org.uk/explore/homefamilies/pages/parents-in-prison.aspx>

Children's Links

Children's Links is a national children's charity committed to improving the quality of life experiences for children, young people, families and communities. Children's Links work with prisons, run play and youth projects, deliver training and provide support to other voluntary sector organisations. <http://childrenslinks.org.uk/index.php/site/page/prisons>

Children of Prisoners Europe (COPE)

Children of Prisoners Europe (COPE) is a European-wide network which encourages innovative perspectives and practices to ensure that children with a parent in prison enjoy their rights under the UN Convention on the Rights of the Child and the EU Charter of Fundamental Rights, and that action is taken to enable well-being and healthy development. <http://childrenofprisoners.eu/>

Dr Kellie Jones

Dr Kellie Jones is an Educational and Child Psychologist registered with HCPC UK. Her previous work with children affected by imprisonment and knowledge of research within the area, has developed Kellie's understanding that this group of children are at risk of internalising (depression, anxiety, withdrawal) and externalising (substance use, behaviour difficulties, difficulties at school). She has working knowledge of these issues and can offer, support, advice and a psychological perspective on how to support children and young people in this situation. <http://drkelliejones.com/>

The Family Support Project

The Family Support Project provides advice and support to individuals and families whose lives are affected by imprisonment. The project also works in the community to change perceptions and negative attitudes, creating realistic opportunities for those who have begun to move forward and get on in their life. Services and resources include: placements, advocacy, signposting, training support, planned activities for children and young people, issue based workshops , a community IT suite and a community cafe. <http://dicdevelopmenttrust.com/>

Email a Prisoner

Email a prisoner is a service which allows families to send an email to someone inside the majority of UK prisons. The emails are printed out and delivered along with other post on a daily basis. <http://emap.prison-technology-services.com/index.cfm>

Families Outside

Families Outside is the only national charity in Scotland that works solely to support families affected by imprisonment. The aim of the charity is to mitigate the effects of imprisonment on children and families, and consequently, to reduce the likelihood of reoffending through support and information for families and for other organisations working with them. <http://www.familiesoutside.org.uk/>

The Fatherhood Institute

The Fatherhood Institute aims to give all children a strong and positive relationship with their father and father-figures. Fatherhood Institute collate and publish research, lobby for legal and policy changes, help public services, employers and others to become more father-inclusive, and work directly with families. <http://www.fatherhoodinstitute.org/>

Grandparents Plus

Grandparents Plus is a national charity which supports grandparents and the wider family in children's lives - particularly when they begin to care for the children during difficult family circumstances, such as when a parent is sent to prison. Grandparents Plus provide a support network for the wider family raising children. Whilst providing the love, care and support these children need, the carers themselves can often feel isolated and stigmatised, ignored by government policy and practice. <http://www.grandparentsplus.org.uk/families-of-prisoners>

Helping Households Under Great Stress (HHUGS)

Helping Households Under Great Stress (HHUGS) is a UK registered charity that exists to provide financial, emotional, and practical support and advice to households impacted by counter-terrorism, national security and extremism-related laws, policies and procedures, nationwide in the UK and abroad. <http://www.hhugs.org.uk/>

Justmentoring Hub

The justmentoring hub links mentoring services that support adults with convictions, criminal justice agency frontline staff, commissioners, service users and their family/friends plus volunteers together in one place. <http://www.justmentoring.org.uk/>

Khulisa

Khulisa is a national UK organisation which was founded in South Africa. It offers fresh and effective methods of tackling violence and crime by working with offenders and their families. <http://www.khulisa.co.uk/>

Action on Addiction

Action on Addiction is a national organisation which supports those who suffer with addiction and/or the consequence of it. One of their key areas of work is with the children and families of those who are addicted. M-PACT (Moving Parents And Children Together) is a whole family 10 session programme including an individual family assessment. It

is facilitated by qualified workers and aimed at families with children aged 8-17 in order to reduce the harmful impact that parental substance misuse and addiction has on family life. [http://www.actiononaddiction.org.uk/For-Families/M-Pact-\(UK\)-Project.aspx](http://www.actiononaddiction.org.uk/For-Families/M-Pact-(UK)-Project.aspx)

Mothers Union

Mothers Union work in around 90 prisons supporting families affected by imprisonment. Aspects of their work include working alongside the chaplaincy, offering hospitality in the visitors centres and in some cases providing a play area for children. They also run parenting groups and relationship courses, support prisoners to write letters to family members and give provisions such as nappies to women's prisons.

<http://www.mothersunion.org/>

The Offenders' Families Helpline

The Offenders' Families Helpline is a free and confidential service for families and friends of offenders across England and Wales. The helpline is open 7 days a week, Monday to Friday 9.00am – 8.00pm, Saturday and Sunday 10.00am-3.00pm: 0808 808 2003.

<http://www.offendersfamilieshelpline.org/>

The helpline aims to:

- Provide information, basic advice and emotional support
- Signpost callers to support services within their local communities
- Assist families in overcoming isolation and confusion which can often accompany conviction and sentencing

Prison Visits

This free online prison visits request system for England and Wales runs along side the prisons own systems and will provide a quicker and easier way of booking visits in the future. It can be used for public sector male, female and young offender establishments at category B and below (not the private or high security estate). Friends, families and others wishing to make a booking will need to fill in a number of details about the prisoner including their prisoner number, which they can obtain from the prisoner and the dates of birth of each of the visitors. <https://www.prisonvisits.service.gov.uk/prisoner>

Pact (Prison Advice & Care Trust)

Pact was established in 2001, as a result of the merger of the Bourne Trust and the Prisoners' Wives and Families Society (PWFS). Between them, the two organisations had 125 years' experience of working with prisoners and their families.

Pact aims to support prisoners and their families to make a fresh start and to minimise the harm that can be caused by imprisonment on offenders, families and communities. Pact supports prisoners and their families through a number of services in the prison and within the community. <http://www.prisonadvice.org.uk/>

POPS (Partners of Prisoners and Family Support Group)

POPS was established in 1988 by family members experiencing the stigma and distress of supporting a relative through a custodial sentence. Now led by Diane Curry OBE, POPS continue to be committed to developing pioneering support services and campaigning throughout the Criminal Justice System to ensure that offenders' families are recognised and supported at all stages. <http://www.partnersofprisoners.co.uk/>

Find A Prisoner

This tool allows you to search and find any prison in England and Wales, by name, category or area. Information provided includes contact details, capacity, regime and visiting information. There are also recommendations about how to travel to each prison. <http://www.justice.gov.uk/contacts/prison-finder>

PFFS

PFFS is an independent voluntary agency which has been helping prisoners' families for over 40 years with the aim of improving families' understanding of the Criminal Justice System in order to reduce their sense of stigma and isolation and improve family relationships. This is done through practical and emotional support, advice and befriending. <http://www.pffs.org.uk/>

Prison Phone Ltd.

Prison Phone Ltd provides inmates with reduced rate phone calls to their family. There are various price plans for families to choose from depending on their usage. The family of the prisoner must sign up to the plan which allows the prisoner to call home at a far cheaper rate than provided by the prison's telephone system. Please note that there is a cost to the families involved. The website below details packages available, how to sign up and other details. <http://www.prisonphone.co.uk/>

The Prison Family Support Alliance

The Prison Family Support Alliance is a joint venture between POPS (Partners of Prisoners and Family Support Group), Pact (Prison Advice & Care Trust), Nepacs and Jigsaw. The Alliance aims to develop and deliver family services in prisons in England and Wales, to share good practice and learning, and to encourage the government, public, private and voluntary sectors to focus on families as part of the strategy to reduce re-offending.

<http://www.prisonadvice.org.uk/>

https://www.i-hop.org.uk/app/answers/detail/a_id/112

https://www.i-hop.org.uk/app/answers/detail/a_id/85

Prisoners Abroad

Prisoners Abroad is a UK-based support organisation for Britons held in and returning from prison abroad and their families.

<http://www.prisonersabroad.org.uk/>

Relate

Relate is the UK's largest provider of relationship support. Relate has a federation of 65 independent centres covering the whole of England and Wales giving a national service providing relationship counselling for individuals and couples, families, children and young people as well as sex therapy. Relate also deliver friendly and informal workshops for people during important stages of their relationships dealing with all aspects of relationship issues. There are also training packages to improve the skills of professionals.

<http://www.relate.org.uk/>

Safe Ground

Safe Ground works to reduce the risk of offending and reoffending based on a continually developing understanding of the origins and impact of crime and a commitment to empowering people to change, whether in prison or the community. They recognise the critical role of relationships in the desistance process and believe they are pivotal to the development and consolidation of a positive identity defined by more than offending behaviour. <http://www.safeground.org.uk/>

Storybook Dads/Storybook Mums

Storybook Dads (and Storybook Mums in the women's prison estate) works in over 100 UK prisons. As well as enabling imprisoned parents to maintain family contact, they also provide training and employment for hundreds of prisoners, improving their skills and chances of rehabilitation.

Storybook Dads works in over 100 UK prisons and helps to maintain the vital emotional bond between parent and child by enabling parents to make bedtime story CDs, DVDs and other educational gifts for their children. <http://storybookdads.org.uk/index.html>

Women in Prison

Women in Prison supports and campaigns for women affected by the Criminal Justice System. They work in all 12 women's prisons in England as well as in the community offering one-to-one support and advice in person or via letter, telephone or email. Women in Prison is a national organisation with offices in London, Manchester and Woking.

<http://www.womeninprison.org.uk/>

Appendix 3

An illustrative study

Paul's life over the past 36 years has been difficult enough; his contact with the justice system has been traumatic.

In May 2013 Paul was arrested and interviewed by the police without legal representation or an appropriate adult. Paul says that he did mention that he had mental health problems but no allowance was made for this. His next interview with the police was six months later, during which Paul had a solicitor and an appropriate adult. However, for neither of the two interviews does there seem to have been any real understanding of, or allowances made, for Paul's condition. Both interviews took place after Paul had been left alone in a cell for some time, and it is likely that he would have said or agreed to anything just to get proceedings over with as quickly as possible. Two months later he was charged and appeared before the Magistrates' Court. His next court appearance was set for 4 April 2014; and on the evening of the 3rd he made a significant attempt on his life. It was at this point that we, his family and his support workers, became aware of Paul's contact with criminal justice services. One can only imagine how distressed our son must have been during the preceding year.

Paul has always had behavioural and mental health problems, including being mute until he was five years old. He lived away from home from a very young age in special schools for children with communication disabilities, and was completely ill-prepared when he was integrated, or rather transferred back into mainstream education as a very immature teenager. His mother and I, in spite of our misgivings, trusted that the 'experts' knew best how to care for him.

Paul went on to have an admission to an adult psychiatric hospital followed by several months in a residential psychiatric adolescent unit. He was discharged prematurely without suitable follow up care and has since had a chequered career both educationally – in and out of university, doing well when he was able to attend – and in his work, where his limited interpersonal skills and particular outlook on life resulted in him having a series of poorly paid and unsuitable jobs.

Over the years, Paul has had many different diagnoses as an explanation of his difficulties. A few years ago we suspected that he had Asperger's syndrome, but had no idea what could be done about it. When we learnt that a Community Adult Asperger's Service existed we pressed for a referral through his GP and, after a lengthy and comprehensive period of assessment, he was diagnosed as having high functioning autism. The nature of Asperger's and the impact it can have on individuals and how they live their daily lives is difficult to understand; even we, who are intimately involved, find it hard. Like many people with Asperger's, Paul is intelligent and

'ordinary' in appearance.

After his diagnosis the future began to have some hope for Paul: he was supported by a psychiatric social work team; moved into supported housing and received help with his benefits; and looked forward to the possibility of training and a suitable work placement. Unfortunately, neither his family nor his support workers knew about his alleged offence and looming court hearing until Paul tried to take his own life.

From the moment they knew of Paul's predicament, those involved in his care involved themselves, much to our gratitude, more than they would be required to do. They researched and contacted people with experience of dealing with individuals with mental health conditions or Asperger's caught up in the criminal justice system; they supplied information about required police and court procedures when dealing with people with particular disabilities; and supplied relevant literature and research.

Unfortunately, from our point of view, and despite the significant amount of information and research provided by KeyRing Living Support Networks and the Prison Reform Trust, the justice system has showed itself to be intransigent: either unwilling or unable to understand the impact that Asperger's can have on the life of a person with that condition, and to accommodate their particular needs.

Paul's ordeal with regard to the court case is over, and he now has a criminal record to add to the list of difficulties and setbacks he has had to face throughout his life.

There is, however, a positive side to events over this last year. As a result of his formal diagnosis Paul now has safe accommodation and support from KeyRing and the Adult Asperger's Psychiatric Team, and is participating in an accountancy course. As a family we have been more active in his support, which he is allowing; and he has been out to lunch with us instead of rejecting all overtures and retreating into himself, as he has done before.

The above account was provided by Paul's father; Paul is not his real name

Families are directly affected when their loved ones come into contact with criminal justice services; we know also that families can play an important role in helping their relatives to stop reoffending and to live safe, healthy and productive lives. This report is a valuable contribution to increasing our understanding of how families can support their relatives, and how their needs might be met through the important work of liaison and diversion services.

Two family members who participated in this study said:

The thing is, families can provide support; we can help [our relative in contact with criminal justice services] and we can provide information about their condition. But it needs to be a two-way street; we want to know what's going on – why would we know about the justice system? It's not easy, and we might need support too. Build on our strengths; families are there forever. However helpful services are they come and they go; that is the nature of things.

My son is now doing an apprenticeship. He was talked to by [the liaison and diversion worker] and they are, like, friends. He's doing really well. He hadn't been to school for two years and was back within a month of [liaison and diversion] being involved. If it wasn't for this service my son would be in prison.

